

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box seal is broken for ballot transport~

At Location

Election Type: General Election

Election Date: 11/08/2022

Name of Location: MARICOPA COUNTY RECORDER'S OFFICE #14233 - DB

Arrival Time: 3:02

Were there ballots to be picked up?

☒ YES <If YES, complete lines 1-7

☐ NO <If NO, complete lines 1-7

Spoils picked up?

☐ YES

☒ NONE

Completed Forms picked up?

☐ YES

☒ NONE

1) Blue Drop Box Seals # IS22007703 & IS22007704 <Indicate the seal numbers that were taken off on blue drop box

2) Blue Drop Box Seals # IS22007698 & IS22007697 <Indicate the seal numbers that were placed on blue drop box

3) Red Box Seals # IS22007700 & IS22007699 <Indicate the seal numbers that were placed on ballot transport box

4) Ballot Box Sealed/Checked on (Date) 11/3/22 (Time) 3:04 <Date and time box was sealed/checked

5) Location Staff Member (Signature) _____

6) Transport Staff Member (Signature) _____

7) Transport Staff Member (Signature) _____

Departure Time: 3:10

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) _____

Sign to acknowledge receipt from Transport Staff Member

Date/Time: _____

Date of Audit Match

Ballot Box Seals # IS22007700 & IS22007699 <If applicable, verify the seal numbers on the box match the above from location

Blue Drop Box Seals # IS22007703 & IS22007704 <Indicate the seal numbers that were broken from blue drop box

Count of Ballots in Transport Bin # 192

G = 192 W = 0

Audit Agent (Signature) _____

Sign to affirm seal #'s match or that no ballots were to be picked up

Date/Time: _____

Date of Audit Match

